Application Data Sheet

Application Information

Application number::

Filing Date::

05/12/04

Application Type::

Provisional

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

O-LINKED GLYCOSYLATION OF PEPTIDES

Attorney Docket Number::

40853-01-5109 PRO

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

46

Small Entity?::

Yes

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Shawn

Middle Name::

Family Name::

DeFrees

Name Suffix:: `

City of Residence::

North Wales

State or Province of Residence::

PA

Country of Residence::

US

Street of Mailing Address::

126 Filly Drive

City of Mailing Address::

North Wales

State or Province of mailing address::

PA

Country of mailing address::

US

Postal or Zip Code of mailing address:: 19454

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

David

Middle Name::

A.

Family Name::

Zopf

Name Suffix::

City of Residence::

Wayne

State or Province of Residence::

PA

Country of Residence::

US

Street of Mailing Address::

560 Beechtree Lane

City of Mailing Address::

Wayne

State or Province of mailing address::

·PA

Country of mailing address::

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Initial 5/11/04

Postal or Zip Code of mailing address:: 19087

Correspondence Information

Correspondence Customer Number:: 24341

Representative Information

Representative Customer Number:: 24341

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::